

Department of Health and Hospitals Center for Records and Statistics

Marriage Officiant Registration Affidavit

	Parish of Marriage		
BEFOI	RE ME, the undersigned notary, pers	sonally came and appear	ed
	,	who being first sworn b	by my deposed and stated:
	That he/she is a priest, minister, rab	bi, clerk of the Religiou	s Society of Friends, or any
	clergyman of		,
	(Name of church, denomination, and location)		
	that he/she is a resident of	(Street Address)	
	(City)	(State)	, (ZIP)
	And, that he/she makes this affidav	it for the purpose of regi	stering as a person authorized
	to celebrate marriages in the State a	nd Parish as required by	LSA-R.S. 9:204.
Signatu	re of Officiant:		
Sworn	and subscribed before me this	day of	
My No	tary State Registration Number	expires	on
Notarv	State (if not Louisiana):		